

CITY OF FORT LAUDERDALE PERMIT APPLICATION

Fax # _____

Date: _____ E-mail: _____

Applicant Type: **MECHANICAL** Building Permit # _____ Plan Review # _____**Note to Applicant:** This form *must* contain all applicable information to avoid delays.

Owner's Name: _____ Phone(_____) _____

Owner's Address: _____ City _____ State _____ Zip _____

Fee Simple Titleholder's Name (If other than owner): _____

Fee Simple Titleholder's Address: _____ City _____ State _____ Zip _____

Contractor: _____

Qualifier: _____ E-mail: _____

Certificate of Competency #: _____ State Registration # (If applicable): _____

Contractor's Address: _____ City _____ State _____ Zip _____

Debris Disposal Company: _____ Phone(_____) _____

Purpose: **A/C REPLACEMENT**

Job Address: _____ Present Use: _____

Subdivision: _____ Lot _____ Block _____ Zoning: _____

Job Costs by Permit Type: ☐ **MECHANICAL** Job Cost \$: _____

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in the City of Fort Lauderdale. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AND AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning in the City of Fort Lauderdale.

WARNING TO OWNER: Your failure to record a Notice of Commencement may result in your paying twice for building improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement. "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies."

Signature: _____ Signature: _____
(Owner or Agent) (Owner or Agent)

Date: _____ Date: _____

NOTARY as to Owner or Agent_____
NOTARY as to Owner or Agent

My Commission Expires: _____ My Commission Expires: _____

MECHANICAL

Qty		Qty	
	A/C Unit Tons		Ventilation Hoods
	Room or Wall Units		Domestic Range Hoods
	Duct Opening		Dryer Vents
	Elect. Heaters KW		Spray Paint Booth
	Exhaust Fan		Fireplaces
	Exhaust Openings		Thermostat
	Condensate Drains		Smoke Detector
	W/Cooler/Freezer		Vav. Boxes
	Reach-In Refrig.		Gas Equipment
	Cooling Towers \$		Fire/Smoke Dampers
	Process Piping \$		Others (List)
	Restaurant Hoods Feet		

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of the county, and there may be additional permits required for other Governmental entities such as Water Management Districts, State Agencies, or Federal Agencies.